

PURPOSE

To ensure consistency regarding the standards and practices of workplace violence prevention programs and activities across the Michigan Department of Health and Human Services (MDHHS) hospitals.

DEFINITIONS

Debrief

A discussion of incident specifics following an incident of workplace violence. This discussion must include hospital staff, discussion of pre-incident circumstances, de-escalation techniques employed, and the incident's outcome.

Threat of Violence

Any intentional communication or other act that threatens an act of violence and would cause a reasonable person to feel terrorized, threatened, or fear physical injury or death to oneself or another person. Any threat of violence, whether verbal, written, visual, or by gesture, will be presumed to be an expression of intent to do harm to another person.

For purposes of this policy, this definition does not include any act initiated by a patient; see APFs [169](#) and [171](#).

Workplace Violence

Any act or threat of violence, harassment, intimidation, or other threatening disruptive behavior that occurs at the work site.

For purposes of this policy, this definition does not include any act or threat initiated by a patient; see APFs [169](#) and [171](#).

POLICY

Hospitals are committed to fostering and maintaining an environment free of workplace violence or threats and that provides for the physical safety and emotional well-being of its staff, patients, families, and visitors.

STANDARDS

Hospital administration must ensure that:

- Notice informing staff, patients, families, and all hospital visitors that hospital premises maintain a zero-tolerance standard for actual or threatened violence, harassment, discrimination or bullying. MDHHS zero-tolerance standards require that all acts or threats of violence are:
 - Reported to hospital administration.
 - Documented via the [MDHHS incident report form](#).
 - Investigated in compliance with respective MDHHS policies and procedures and/or in accordance with Michigan law, as applicable.
 - Dealt with appropriately and timely, if substantiated.
 - Responded to in writing, within a reasonable time, regarding substantiated actual or threatening behavior; see [APR 471](#).
- A hospital workplace violence prevention committee is established and is tasked with:
 - Developing, and revising as necessary, a workplace violence standard operating procedure (SOP) for the hospital consistent with this APF as well as relevant MDHHS work rules and policies, and Michigan Civil Service Commission rules and regulations. The workplace violence prevention SOP must, at least, address the following:
 - An employee's obligation, and the proper processes, to report workplace violence.
 - Necessary introductory, and follow-up, workplace violence training obligations for hospital staff.
 - Post workplace violence incident procedures of employee support and follow-up, post-incident debriefing, medical care and necessary medical referrals for victims, reporting, and filing of claims.
 - Ensuring the hospital possesses equal concern for the safety of its employees, patients and visitors.
 - Auditing the hospital's risk of violence through analyzing hazards and evaluating risks. This includes, but is not

limited to, an initial risk evaluation and formal re-evaluations following workplace violence incidents.

- Periodically reviewing SOPs that impact the hospital's risk of workplace violence (such as, but not necessarily limited to, Video Surveillance Monitoring, Crisis Intervention, Access Control) and make suggestions for improvement.
- Ensuring that hospital employees are trained and knowledgeable of the appropriate responses to workplace violence.
- Reviewing incidents of hospital workplace violence and make suggested changes to hospital administration to prevent future incidents.
- Developing initiatives intended to prevent workplace violence.
- Remaining abreast of best practice strategies to prevent workplace violence.

Hospital administration must appoint one of the following to serve as a member on the workplace violence prevention committee:

- Hospital administration.
- Quality.
- Human resources.
- Safety.
- Nursing.
- Direct care.
- Maintenance.
- Office of Recipient Rights.
- Other staff as necessary at the discretion of the hospital director.

The hospital's workplace violence prevention committee should meet not less than quarterly.

- Firearms, unless the individual is exempt under civil service rules, or items with intent to use as a weapon or to do physical harm are prohibited from hospital buildings and premises. This includes inside personal vehicles.

- Follow-up and support are provided to victims, witnesses and others affected by workplace violence including trauma-informed care and psychological counseling, if needed.

CONTACT

For more information contact the Bureau of Hospitals and Administrative Operations.

REFERENCES

[Administrative Policy Human Resources \(APR\) 471, Employee Safety.](#)

Civil Service Rule 2-20, Workplace Safety: Violence, Firearms, and Explosives and Civil Service Regulation 2.05, Workplace Safety.

The Joint Commission, Standard EC.02.01.01

New Workplace Violence Prevention Recommendation. The Joint Commission. 19 April 2018.

https://www.jointcommission.org/deline_tjc/new_workplace_violence_prevention_recommendations/